



ASC Utilization Report
State Form 49933 (R3/6-05)
Indiana State Department of Health
Acute Care

Status: Finalized

I. Center Identification

Organization Name: INVERNESS SURGERY CENTER

Street Address: 8004 Carnegie Blvd

City: Fort Wayne

County: Allen

Administrator Name: Chris Butler

Administrator Email: chris.butler@parkview.com

ASC Web Address: www.invernesssurgerycenter.com

Fiscal Year: 2016

Accredited: ☒ Yes ☐ No

Name of Accrediting Body: The Joint Commission

Deemed Status: ☐ Yes ☒ No

Corporate Tax Status: ☒ For Profit ☐ Non Profit

II. Identification of Surgical Resources

Number of operating rooms	4
Number of procedure rooms	1

III. Utilization Statistics

A. Total Patients and Procedures		
Time Period	Number of Patients	Number of Procedures
Persons Served in twelve-month period	1800	1825
B. Ten Most Frequent Surgical Procedures Performed		
CPT Code	Total Procedures	
45380	368	
g0105	218	
g0121	147	
45385	144	
45378	132	
58563	61	
43239	52	

74740	52
58558	43
58340	33

IV. Outcomes from Surgical Procedures

Number of patients with a Post-Surgical wound infection within 30 days following a surgical encounter.	0
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